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APPLICANTS

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OA

** CONTINUING DATA *****

This application is a CIP of 09/157,469 09/21/1998 PAT 6,343,116

OA

** FOREIGN APPLICATIONS *****

OA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/27/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>M. Anwah</i> OA Examiner's Signature Initials	WA	11	75	15

ADDRESS

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TITLE

Speech processing for telephony API

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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